

Please fill out this report as completely and transfer to [www.seaturtle.org](http://www.seaturtle.org).  
 Maintain a copy for your records.

## Sea Turtle Disorientation Report

<b>Date:</b>		<b>Observers:</b>	
<b>Time:</b>		<b>Nest Number:</b>	
<b>Beach:</b>			
<b>Moon Phase:</b>	<b>Time of Moon Rise:</b>	<b>Time of Moon Set:</b>	<b>Tide:</b>
<b>Dead Hatchlings:</b>		<b>Live Hatchlings</b>	
<b>Circle one :</b>	<b>Disorientation</b> – Being unable to maintain a constant directional movement, including frequent changes in direction or circling <b>Misorientation</b> – Maintaining constant directional movement in any direction other than toward the ocean		
<b>Light Source – Circle One</b>			
Unknown    Residential    Commercial    Street Light    Nourishment Equipment  Ambient    Other (List in <i>Source Description</i> )			
<b>Source Description</b> - (Include number of lights identified, whether indoor light, landscape light, porch or balcony light, etc.) Example: 3rd floor balcony light or 2 landscaping lights by oleander			
<b>Initial Action Taken</b> (Spoke with renter/owner, left literature, contacted Law Enforcement)			
<b>Follow Up</b> (Spoke with rental agency or owner, notified local Law Enforcement) <b>Date</b> _____			
<b>Photos Taken?</b> Yes    No		<b>Video Taken?</b> Yes    No	
<b>Date Recorded into <a href="http://www.Seaturtle.org">www.Seaturtle.org</a>:</b>			

**Questions or concerns:**  
**SCDNR Marine Turtle Conservation Program**  
**P. O. Box 12559**  
**Charleston, SC 29422-2559**  
**Phone: 843-953-9015**  
**Email: [seaturtles@dnr.sc.gov](mailto:seaturtles@dnr.sc.gov)**  
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